



The Official U.S. Government Site for Medicare

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## Medicare 2016 costs at a glance

Listed below are basic costs for people with Medicare. If you want to see and compare costs for specific health care plans, visit the [Medicare Plan Finder](#).

If you want specific cost information (like whether you've met your [deductible](#), how much you'll pay for an item or service you got, or the status of a [claim](#)), visit [MyMedicare.gov](#).

[Find out if Medicare covers a specific test, item or service that's not listed under the detailed Medicare cost information section of this page.](#)

2016 costs at a glance	
Part A premium	Most people don't pay a monthly premium for Part A (sometimes called " <a href="#">premium-free Part A</a> "). If you buy Part A, you'll pay up to \$411 each month. <a href="#">Calculate my premium</a> .
Part A hospital inpatient deductible and coinsurance	<p>You pay:</p> <ul style="list-style-type: none"> <li>\$1,288 deductible for each benefit period</li> <li>Days 1-60: \$0 coinsurance for each benefit period</li> <li>Days 61-90: \$322 coinsurance per day of each benefit period</li> <li>Days 91 and beyond: \$644 coinsurance per each "lifetime reserve day" after day 90 for each benefit period (up to 60 days over your lifetime)</li> <li>Beyond lifetime reserve days: all costs</li> </ul>
Part B premium	Most people pay \$104.90 each month.
Part B deductible and coinsurance	\$166 per year. After your deductible is met, you typically pay 20% of the <a href="#">Medicare-approved amount</a> for most doctor services (including most doctor services while you're a hospital inpatient), outpatient therapy, and <a href="#">durable medical equipment</a> .
Part C premium	The Part C monthly <a href="#">premium</a> varies by plan. <a href="#">Compare costs for specific Part C plans</a> .
Part D premium	The Part D monthly <a href="#">premium</a> varies by plan (higher-income consumers may pay more). <a href="#">Compare costs for specific Part D plans</a> .

## Detailed Medicare cost information for 2016

### [Medicare Part A \(Hospital Insurance\)](#)

**Monthly premium (for people who pay a [premium](#)):**

If you buy Part A, you'll pay up to \$411 each month.

Most people get [premium-free Part A](#). [Calculate my premium](#).

**Late enrollment penalty:**

- If you don't buy it when you're first eligible, your monthly premium may go up 10%. (You'll have to pay the higher premium for twice the number of years you could have had Part A, but didn't sign up.) [Learn more about the Part A late enrollment penalty.](#)

**Part A costs if you have Original Medicare****Note**

All Medicare Advantage Plans must cover these services. If you're in a Medicare Advantage Plan, costs vary by plan and may be either higher or lower than those in Original Medicare. Review the "[Evidence of Coverage](#)" from your plan.

**Home health care**

- \$0 for home health care services.
- 20% of the [Medicare-approved amount](#) for [durable medical equipment](#).

**Hospice care**

- \$0 for [hospice](#) care.
- You may need to pay a [copayment](#) of no more than \$5 for each prescription drug and other similar products for pain relief and symptom control while you're at home. In the rare case your drug isn't covered by the hospice benefit, your hospice provider should contact your Medicare drug plan to see if it's covered under [Part D](#).
- You may need to pay 5% of the [Medicare-approved amount](#) for inpatient [respite care](#).
- Medicare doesn't cover room and board when you get hospice care in your home or another facility where you live (like a nursing home).

**Hospital inpatient stay**

- \$1,288 [deductible](#) for each [benefit period](#).
- Days 1–60: \$0 [coinsurance](#) for each benefit period.
- Days 61–90: \$322 coinsurance per day of each benefit period.
- Days 91 and beyond: \$644 coinsurance per each "lifetime reserve day" after day 90 for each benefit period (up to 60 days over your lifetime).
- Beyond [lifetime reserve days](#): all costs.

**Note**

You pay for private-duty nursing, a television, or a phone in your room. You pay for a private room unless it's medically necessary.

**Mental health inpatient stay**

- \$1,288 [deductible](#) for each [benefit period](#).
- Days 1–60: \$0 [coinsurance](#) per day of each benefit period.
- Days 61–90: \$322 coinsurance per day of each benefit period.
- Days 91 and beyond: \$644 coinsurance per each "lifetime reserve day" after day 90 for each benefit period (up to 60 days over your lifetime).
- Beyond [lifetime reserve days](#): all costs.
- 20% of the [Medicare-approved amount](#) for mental health services you get from doctors and other providers while

you're a hospital inpatient.

#### Note

There's no limit to the number of benefit periods you can have when you get mental health care in a general hospital. You can also have multiple benefit periods when you get care in a psychiatric hospital. Remember, there's a lifetime limit of 190 days.

#### Skilled nursing facility stay

- Days 1–20: \$0 for each [benefit period](#).
- Days 21–100: \$161 [coinsurance](#) per day of each benefit period.
- Days 101 and beyond: all costs.

#### Medicare Part B (Medical Insurance)

##### Monthly premium:

In 2016, most people pay the Part B [premium](#) of \$104.90 each month.

However, if your modified adjusted gross income as reported on your IRS tax return from 2 years ago is above a certain amount, you may pay more.

The standard Part B premium amount is \$121.80 (or higher depending on your income). However, most people who get Social Security benefits will continue to pay the same Part B premium amount as they paid in 2015. This is because there wasn't a cost-of-living increase for 2016 Social Security benefits. You'll pay a different premium amount if:

You enroll in Part B for the first time in 2016.

You don't get Social Security benefits.

You're directly billed for your Part B premiums.

You have Medicare and Medicaid, and Medicaid pays your premiums. (Your state will pay the standard premium amount of \$121.80.)

Your modified adjusted gross income as reported on your IRS tax return from 2 years ago is above a certain amount.

If you're in 1 of these 5 groups, here's what you'll pay:

If your yearly income in 2014 (for what you pay in 2016) was			You pay (in 2016)
File individual tax return	File joint tax return	File married & separate tax return	
\$85,000 or less	\$170,000 or less	\$85,000 or less	\$121.80
above \$85,000 up to \$107,000	above \$170,000 up to \$214,000	Not applicable	\$170.50
above \$107,000 up to \$160,000	above \$214,000 up to \$320,000	Not applicable	\$243.60
above \$160,000 up to \$214,000	above \$320,000 up to \$428,000	above \$85,000 and up to \$129,000	\$316.70
above \$214,000	above \$428,000	above \$129,000	\$389.80

[Get more information about your Part B premium from Social Security.](#)

##### Late enrollment penalty:

In most cases, if you don't sign up for Part B when you're first eligible, you'll have to pay a late enrollment penalty for as long

as you have Part B. Your monthly premium for Part B may go up 10% for each full 12-month period that you could have had Part B, but didn't sign up for it. Also, you may have to wait until the General Enrollment Period (from January 1 to March 31) to enroll in Part B, and coverage will start July 1 of that year.

[Learn more about the Part B late enrollment penalty.](#)

## Part B costs if you have Original Medicare

### Note

All Medicare Advantage Plans must cover these services. If you're in a Medicare Advantage Plan, costs vary by plan and may be either higher or lower than those in Original Medicare. Review the "[Evidence of Coverage](#)" from your plan.

### Part B annual deductible:

You pay \$166 per year for your Part B [deductible](#). After your deductible is met, you typically pay 20% of the [Medicare-approved amount](#) for most doctor services (including most doctor services while you're a hospital inpatient), outpatient therapy, and [durable medical equipment](#).

### Clinical laboratory services:

You pay \$0 for Medicare-approved services.

### Home health services:

- \$0 for home health care services.
- 20% of the [Medicare-approved amount](#) for [durable medical equipment](#).

### Medical and other services:

You pay 20% of the [Medicare-approved amount](#) for most doctor services (including most doctor services while you're a hospital inpatient), outpatient therapy, and [durable medical equipment](#).

### Note

In 2016, there may be [limits on physical therapy, occupational therapy, and speech language pathology services](#). If so, there may be exceptions to these limits.

### Outpatient mental health services

- You pay nothing for your yearly depression screening if your doctor or health care provider accepts assignment.
- 20% of the [Medicare-approved amount](#) for visits to a doctor or other [health care provider](#) to diagnose or treat your condition. The Part B [deductible](#) applies.
- If you get your services in a hospital outpatient clinic or hospital outpatient department, you may have to pay an additional [copayment](#) or [coinsurance](#) amount to the hospital. This amount will vary depending on the service provided, but will be between 20-40% of the Medicare-approved amount.

### Partial hospitalization mental health services:

You pay a percentage of the [Medicare-approved amount](#) for each service you get from a doctor or certain other qualified mental health professionals if your health care professional accepts [assignment](#). You also pay [coinsurance](#) for each day of partial hospitalization services provided in a hospital outpatient setting or community mental health center, and the Part B [deductible](#) applies.

### Outpatient hospital services

- You generally pay 20% of the [Medicare-approved amount](#) for the doctor or other health care provider's services, and the Part B [deductible](#) applies.

- For all other services, you also generally pay a [copayment](#) for each service you get in an outpatient hospital setting. You may pay more for services you get in a hospital outpatient setting than you would pay for the same care in a doctor's office.
- For some screenings and preventive services, [coinsurance](#), copayments, and the Part B deductible don't apply (so you pay nothing).

### **Medicare Part C (Medicare Advantage)**

#### **Monthly premium:**

The Part C monthly [premium](#) varies by plan.

#### **Deductibles, copayments, & coinsurance:**

The amount you pay for Part C deductibles, copayments, and/or coinsurance varies by plan. [Look for specific Part C plan costs](#), and then call the plans you're interested in to get more details.

### **Medicare Part D (Medicare prescription drug coverage)**

#### **Monthly premium:**

The Part D monthly [premium](#) varies by plan (higher-income consumers may pay more).

The charts below show your estimated prescription drug plan monthly premium based on your income as reported on your IRS tax return from 2 years ago and last year. If your income is above a certain limit, you'll pay an income-related monthly adjustment amount in addition to your plan premium.

If your filing status and yearly income in 2014 was			
File individual tax return	File joint tax return	File married & separate tax return	You pay (in 2016)
\$85,000 or less	\$170,000 or less	\$85,000 or less	your plan premium
above \$85,000 up to \$107,000	above \$170,000 up to \$214,000	not applicable	\$12.70 + your plan premium
above \$107,000 up to \$160,000	above \$214,000 up to \$320,000	not applicable	\$32.80 + your plan premium
above \$160,000 up to \$214,000	above \$320,000 up to \$428,000	above \$85,000 up to \$129,000	\$52.80 + your plan premium
above \$214,000	above \$428,000	above \$129,000	\$72.90 + your plan premium

#### **Late enrollment penalty:**

You may owe a late enrollment penalty if you go without a Medicare Prescription Drug Plan (Part D), or without a Medicare Advantage Plan (Part C) (like an HMO or PPO) or other Medicare health plan that offers Medicare prescription drug coverage, or without [creditable prescription drug coverage](#) for any continuous period of 63 days or more after your [Initial Enrollment Period](#) is over.

In general, you'll have to pay this penalty for as long as you have a Medicare drug plan. The cost of the late enrollment penalty depends on how long you went without Part D or creditable prescription drug coverage. [Learn more about the Part D late enrollment penalty](#).

#### **Deductibles, copayments, & coinsurance:**

The amount you pay for Part D deductibles, copayments, and/or coinsurance varies by plan. [Look for specific Medicare drug plan costs](#), and then call the plans you're interested in to get more details.



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